

**PRIVATELY OWNED CERVIDAE FACILITY
REGISTRATION AND BUSINESS PLAN****MODIFICATION APPLICATION**

Issued under the authority of Executive Order No. 2004-3 and Act 190 of P.A. 2000.
Failure to comply with the requirements of Act 190 may result in fines, imprisonment, or both.

NOTE: Application must be legible and completed in its entirety to be processed.

HERD NUMBER _____

☐ CHANGE REGISTRATION CLASS

☐ CHANGE REQUIRES NO FEE (See reverse side)

☐ TO CLASS II (EXHIBITION) **\$450**

☐ CHANGE SIZE OF FACILITY **\$100**

☐ TO CLASS III (RANCH) **\$750**

FROM _____ ACRES TO _____ ACRES

☐ TO CLASS IV (FULL) **\$750**

Applicant Full Name		Business/Facility Name	
Mailing Address		Facility Address	
City, State, ZIP		City, State, ZIP	
Telephone ()	E-Mail Address (Optional)	Business Telephone ()	Business FAX ()
Size of Property Enclosed/To Be Enclosed: (attach diagram and measurements of enclosure) Acres		County	Township
		Section(s)	
Legal Description of Property or <input type="checkbox"/> Copy of deed or other appropriate documentation showing the legal description is attached			
Existing/Proposed Cervidae Species			
<input type="checkbox"/> White-tailed Deer # <input type="checkbox"/> Fallow Deer # <input type="checkbox"/> Sika Deer # <input type="checkbox"/> Elk #			
<input type="checkbox"/> Reindeer # <input type="checkbox"/> Red Deer # <input type="checkbox"/> Other (specify) #			
Existing/Proposed Method of Fencing			
Height <input type="checkbox"/> 4 1/2 Foot <input type="checkbox"/> 10 Foot <input type="checkbox"/> Other (specify) _____			
Type <input type="checkbox"/> Woven Wire <input type="checkbox"/> Chain Link <input type="checkbox"/> Other (specify) _____			
Complete the following four items if you are expanding your facility (attach additional sheets if necessary):			
1. Existing/Proposed Method of Flushing and Verification of Proposed Removal of Free-Ranging Cervidae: _____			
2. Existing/Proposed Record Keeping System and Animal Identification: _____			
3. Current Zoning of Property: <input type="checkbox"/> Agricultural <input type="checkbox"/> Residential <input type="checkbox"/> Other (specify) _____			
4. Conforms to local fencing ordinances? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Disease Herd Plan (See MDA Insert) <input type="checkbox"/> TB Accredited <input type="checkbox"/> No Accreditation <input type="checkbox"/> CWD Certified <input type="checkbox"/> No Certification			
Do you wish to have your facility name and contact information given to the public by the Department? <input type="checkbox"/> Yes <input type="checkbox"/> No			

I certify that the information contained in this application and all attachments are true and correct to the best of my knowledge.

Applicant Signature _____

Date _____

Application that requires fee: Make check or money order payable to "State of Michigan." Return application with appropriate fee to:

**** FOR DNR CASHIER'S USE ONLY - DO NOT WRITE BELOW ****

**CASHIER
MICHIGAN DEPARTMENT OF NATURAL RESOURCES
PO BOX 30451
LANSING MI 48909-7951**



PRIVATELY OWNED CERVIDAE FACILITY REGISTRATION AND BUSINESS PLAN MODIFICATION APPLICATION INSTRUCTIONS

*Issued under the authority of Executive Order No. 2004-3 and Act 190 of P.A. 2000.
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This application is for a registered facility that is reporting registration information changes that have occurred or will occur. For registration class changes, registrations expire three (3) years from the date of issuance. For all other modifications, the registration expiration date shall not change from the current one. Reminder: Renewal applications require a separate form and must be submitted 60 days prior to the expiration of a registration.

Herd Number: The eight-digit number assigned to the facility and Cervidae herd. The herd number must be written on the application.

Fees: A \$100 application fee is required for modification to the size of the facility. The fee required for a registration class change is the appropriate fee for the new class, i.e., Class II (Exhibition), \$450; Class III (Ranch), \$750; or Class IV (Full), \$750.

No fees are required, but an application shall be submitted within 30 days after any of the following changes have occurred:

- Change to the complete name, business name, business address, or telephone number of the facility registration holder;
- Change to the complete address of the facility location;
- Sale or transfer of ownership of the facility;
(Note: A written statement signed by the new and previous owners is required to verify the sale or transfer of ownership.)
- Introduction of new species into the facility.

Changing Registration Class: Indicate the appropriate registration class for the intended purpose of the facility. See Operational Standards For Registered Privately Owned Cervidae Facilities, December 2005, for additional facility class descriptions. The Hobby registration class has been eliminated. Therefore, registration class changes to Hobby (Class I) will not be approved.

Legal Description of Property: Refers to the full description commonly found on deeds or title insurance documents (i.e., North ½ of south ½ of southwest ¼ of northwest ¼ of section 16 township 5 north range 2 west Clinton County, Michigan).

Cervidae Species: Indicate all species currently held or that will be held, and the population goal numbers for each species.

Method of Fencing: Indicate the existing/proposed height and type of fencing. Please refer to the Operational Standards, Facility Standards, New Construction: "The industry standard wire is referred to as *fixed-knot 20-96-6-12.5* and is required for the lower 8 feet in new construction. All new construction shall utilize at least 10 foot continuous or 8 foot and 2 foot top panel vertical woven wire or structurally stronger material securely connected at minimum 3 foot intervals using metal wire. The wire shall not have openings greater than 6 inches by 6 inches..."

Method of Removal of Free-Ranging Cervidae: List existing/proposed methods to remove free-ranging Cervidae from the facility. This includes flushing methods and removal by other methods, such as hunting. Indicate the method of verification that all free-ranging Cervidae have been removed. Include additional sheets if necessary.

Record Keeping System and Animal Identification: Describe the record keeping system and animal identification (if applicable to registration class) that is/will be used in accordance with Act No. 190, Public Acts of 2000, and the Operational Standards.

Two forms of animal identification are required for each animal. See the enclosed Michigan Department of Agriculture (MDA) information *Cervid Identification Options*. Facilities that cannot tag animals added to the herd via natural reproduction must implement additional biosecurity measures.

Zoning: Indicate the current zoning of the property, and indicate whether or not the proposed facility conforms to any local fencing ordinances.

Disease Herd Plan: A disease herd plan is required. See the enclosed MDA information *Disease Herd Plan Options*.

Signature: Sign and date the application. Your signature certifies that you are aware of and will abide by:

- Registration requirements as described within Act 190, Public Acts of 2000:
<http://www.legislature.mi.gov>
- Executive Order No. 2004-3
<http://www.michigan.gov/gov/> and
- Operational Standards For Registered Privately Owned Cervidae Facilities, December 2005.
<http://www.michigan.gov/dnr>, select Wildlife & Habitat, then select Privately-owned Cervidae.

Submit Application: Mail applications that require fees (and check or money order) to the Michigan DNR Cashier at the address on the front of the application. Mail applications with no fee to the Wildlife Special Projects Coordinator at the address listed below.

Questions? Contact: **Wildlife Special Projects Coordinator** **517-373-1263**
Wildlife Division
Michigan Department of Natural Resources
PO Box 30444
Lansing, Michigan 48909-7944